

PATENT

Atty. Docket No.: 2852 PRO (203-3408)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Scott Cunningham

Examiner: Gary Jackson

Serial No.: 10/621,759

Group Art Unit 3763

Filed: July 17, 2003

Dated: January 23, 2006

For: SURGICAL NEEDLE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL FORM

Sir:

Transmitted herewith is an amendment in the above-identified application.

- [] Small entity status of this application under 37 C.F.R. § 1.9 and 1.27 has been established by a verified statement previously submitted.
- [] A verified statement to establish small entity under 37 C.F.R. § 1.9 and 1.27 is enclosed.
- [X] No additional fee is required.

The fee has been calculated as shown below:

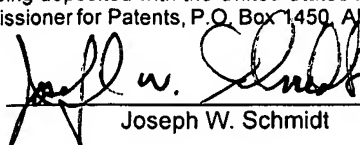
| | (Col. 1) | (Col. 2) | (Col. 3) | SMALL ENTITY | OTHER THAN SMALL ENTITY |
|--|---|---------------------------------------|------------------|--------------------|----------------------------|
| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NO. PREVIOUSLY PAID FOR | PRESENT EXTRA | ADDIT. RATE FEE | ADDIT. RATE FEE |
| TOTAL | 12 | MINUS 20 | = | X 9 \$ | X 18 \$ 0 |
| INDEP. | 3 | MINUS 3 | = | X 43 \$ | X 86 \$ 0 |
| <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM | | | | X 140 \$ | X 280 \$ 0 |
| | | | | TOTAL | OR TOTAL \$ 0 |
| | | | | ADDIT. FEE | \$ -0- |

- * If the entry in Co. 1 is less than entry in Col. 2, write "0" in Col. 3.
- ** If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20".
- *** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".
- The Highest No. Previously Paid For" (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

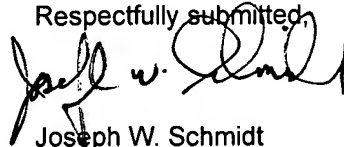
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, postpaid in an envelope, addressed to the: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on date below.

Dated: January 23, 2006


Joseph W. Schmidt

- ☐ Please charge Deposit Account No. 21-0550 in the amount of \$____. Two (2) copies of this sheet are enclosed.
- ☐ A check in the amount of \$____ is enclosed.
- ☒ Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. § 1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. 21-0550. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. 21-0550 therefor. TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

Respectfully submitted,



Joseph W. Schmidt
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JWS/td